POSITION	INITIALS	ID NO.	DATE	
FEE DETERMINATION	CHO.	(e9.66.)	7/26	
O.I.P.E. CLASSIFIER		10	9-1-0	
FORMALITY REVIEW			10 - 1	
RESPONSE FORMALITY REVIEW				
	62	14831	3.5	

INDEX OF CLAIMS

~	Rejected	N	Non-elected
	Allowed	1	Interference
-	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

÷ Restricted 0 Objected									
Claim Date	Claim	Date	Claim	Date					
Pringing 77 C.C.	Final Forginal		Final Original						
112: -	5 -		101						
3	52 -		102						
	53 - 54 -	 	103						
	5\$	 	104						
6	56		106	- 					
7	57		107						
8	58		108						
9	59		109						
10	60	+++++	110						
12	62		111						
13	63	+++++	112						
14	64		114						
159	65		115						
16	66		116						
	67		117						
18	68		118						
19	69		119						
20	70		120						
21 22	71		121						
23	72 73	 	122						
24	74	+	124	 					
25	75	 	125	++++					
26	76		126	 					
(27)	77		127						
28	78		128						
29	79		129						
30	80		130						
22 11 1	81		131						
33	83	 	132						
34	84		134	 					
35	85		135	 					
36	86		136						
37	87		137						
38	88		138						
39 40 40	89		139						
! 1 1 1 1 1 1 1 1 1 1	90	+++++	140	 					
1-140 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		 	141						
43	92	+++++	142	 					
44	94	 	144						
45	95	 	145	 					
46	96		146						
47 N V	97		147	 					
48 \ -	98		148						
51	99		149						
	100		150						

If more than 150 claims or 10 actions staple additional sheet here

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